

To us the giving of medals is only beginning to have a significance, so that we can hardly understand the full meaning of the gift by the Queen of a jewel designed by the Prince Consort of appropriate form, material, and symbolism, but the people arranged that a sum of fifty thousand pounds should in some way mark her work.

Though she became an invalid after her return, she was able to direct the use of this money, and arranged that a wing of St. Thomas's Hospital be made a place for the training of nurses, and there was founded the "Nightingale Home," which is a part of that imposing structure so familiar to those who have occasion to cross the London bridges.

Florence Nightingale still lives. The evolution of the nurse is incomplete. Every year beautiful homes are erected for her comfort and greater care is taken with her instruction and training. There is no sex in good works, and men and women alike are quietly, steadily, and efficiently working that her development may continue.

BALTIMORE'S WORK IN TUBERCULOSIS

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DURING the past few years large numbers of tuberculous persons have applied for treatment to the dispensary of the Johns Hopkins Hospital whose admission to the wards was obviously unwise, and who, after a single visit, never returned, and so were lost sight of. To any thinking person these people, poor, ill, and ignorant as they usually are, are objects not only of pity but of very lively interest, as being the breeders and conveyers of our commonest fatal infection, and the centre, each one, of a veritable circle of danger in his own household and neighborhood,—often, indeed, by reason of the necessity of still carrying on their occupation, in spite of illness, to people far outside his immediate vicinity.

To Dr. Osler, the medical chief of the hospital, the necessity for putting some limit to this danger seemed imperative, and in 1900 he appointed from the third-year class of the Medical School a student whose duty it was to follow and visit in their homes all consumptives who came to the dispensary. Saturday afternoons, Sundays, and holidays were practically all the time she could give to the work, but the results of her months of effort are most satisfactory. Trouble has often been met in finding patients, many of them giving false addresses, the

Russians and Hebrews being usually suspicious of interference and averse to instruction; but she has succeeded in visiting one hundred and ninety patients in their homes, seeing them at their daily work, observing their habits and surroundings, and in each case instructing the invalids and their families in the essentials of disinfection and the means of limiting the spread of the disease.

She has found the consumptives in meat-shops and small dairies, in bakeries and cracker stores, where with every touch of their soiled hands they were certainly sending out tubercle bacilli on their wares. In their homes she found them sewing, weaving, cooking for sale, cobbling, etc., and leaving their sputum often upon the articles for sale, always about the room and on all surrounding objects. Bedridden invalids she found lying on couches in the family living-room or by the kitchen fire in the midst of conditions which ranged from ordinary carelessness to indescribable filth. Often her patients moved from place to place, leaving the infected homes to be occupied, uncleansed, by newcomers,—the one hundred and ninety persons visited did actually, while under observation, occupy two hundred and thirty-four houses, undoubtedly leaving each one a hot-bed of disease.

Very few of these people knew of the possibility of imparting their disorder, while those who did lived, with their families, in the constant fear of such a result, without in the least knowing how to prevent it. Excepting the Russians, whites and blacks alike, and almost universally, gratefully received advice and warning and tried to follow instructions. The "doctor lady," impressing always the fact that the sputum is the source of danger, has taught them to collect and destroy the sputum, scrub their floors, use disinfectant solutions, admit light and air, boil the patients' dishes and other articles, and follow what personal hygiene is possible; wisely, however, in houses where there was opposition or where the conditions made much improvement impracticable, she did not antagonize or discourage the family by insisting on too many reforms. Printed circulars from the dispensary containing simple instructions and directions on tuberculosis were often left with the patient.* Always, when the dreaded name "consumption" had not already been attached to the disease, she has avoided giving it, if without it the patient thoroughly felt himself a menace to others.

Lack of time made it impossible to follow up these cases, but whenever revisiting of the homes was accomplished, some improvement of conditions and a definite effort to follow directions have nearly always been found. Houses are cleaner, sputum is being properly collected and destroyed, dishes are being boiled, and in an encouraging number

* Printed dispensary circular entire.

of instances the patient has been moved to a lighter, better-ventilated room, and sleeps alone.

This year the work is undertaken with new courage and energy. Another student, also a woman, has begun the visits, while a doctor in the dispensary is charged with investigating the addresses given to avoid loss of time in finding the patients. It is hoped that Baltimore can soon favorably compare results with New York in the decreased death-rate from tuberculosis.*

This house-to-house visiting by the students is only one, though certainly the most practical, manifestation of the work of medical men and women in Baltimore to control this enemy at our door. Many doctors are investigating the worst infected areas in the city,† and the addresses made at the monthly meetings of the Society for the Study of Tuberculosis treat the subject from every point.‡ The students' work, however, is of most interest to nurses, as being exactly what we ourselves might do, and what we believe many nurses would be glad to do if the opportunity were given them. Such an opportunity of any definite nature exists nowhere at present, so far as we know, though undoubtedly the district and visiting nurses are able in the course of their general duties to perform a large amount of useful work in this direction. This, however, cannot be compared in usefulness with the work which might be accomplished were it possible to make provision for one or more nurses to carry on this special work regularly and systematically. In this day, while gifts for various philanthropic purposes are many, and while hospitals are not only built and maintained, but libraries and laboratories are added and costly apparatus supplied for the purpose of investigating disease in order to fight it more effectually, it seems reasonable to assume that some effort ought to be made to apply as fully and practically as possible that knowledge which we have already obtained.

If in Baltimore one young student, whose time was already nearly filled with exacting studies and duties, could accomplish so much, might not the results accomplished by another woman, equally earnest and conscientious, who could give her whole time, be proportionately greater? We think this idea might be carried out in various ways.

By a special fund providing for the maintenance of this particular work in connection with that of the visiting nurse, one or more nurses might be added to the regular staff, whose whole time would be devoted

* Statistics, Board of Health of New York City.

† "The Tuberculous Areas of Baltimore," by Dr. H. W. Buckler, in the *Johns Hopkins Hospital Bulletin*, July, 1901.

‡ *The Philadelphia Medical Journal*, special number on "Tuberculosis," December 1, 1900.

to this special object,—that is, the prevention of the spread of tuberculosis by such measures as have been already outlined. This work might also be carried on in some instances through the regular nursing-staff of a hospital. The latter idea finds expression already in some institutions, as, for instance, in the Children's Hospital, Boston, where one nurse is set apart for visiting the homes of the recently discharged children and giving them the necessary supervision, care, and instruction in their own homes as a continuation of the hospital treatment. Established not precisely for the same purpose, but somewhat similar in its effect, is the work of the outside obstetric nurse in the Johns Hopkins Hospital.

It is our belief, however, that by far the most effective method would be one which should place a nurse in this particular field of work under the auspices of the Board of Health. She might even be a member of that body (as is the case now in a few cities), and authorized to look after this part of its general work in safeguarding the health of the community. For many reasons we believe that a thoroughly well-trained, practical nurse would be a valuable addition to any Board of Health, but this especially important work can only be carried on efficiently when performed by someone who is able to utilize to the utmost existing powers and facilities for the prevention of the spread of disease, and who is supported by some recognized authority.

DISPENSARY CIRCULAR OF JOHNS HOPKINS HOSPITAL

DIRECTIONS TO PATIENTS SUFFERING FROM TUBERCULOSIS.

Tuberculosis is a disease caused by the growth of very small living germs in various parts of the body. The organ most frequently diseased is the lung. The mucus or spittle coming from such a lung may contain millions of living germs and may therefore be a source of danger to other people and also to the patient if not carefully disposed of.

One careless person may be the cause of the disease being given to many others. If the mucus is expectorated in improper places it may dry and become dust, and when blown about in the air it may be inhaled by healthy persons, who become infected by the disease-germs contained in the dust.

PRECAUTIONS ABOUT EXPECTORATION, CARE OF ROOMS, DISHES, ETC.

1. Cover the mouth when coughing with the hand or with a handkerchief.
2. Never spit about the streets, on the floor, into the fireplace, or into any vessel unless it contains a disinfectant solution.
3. When indoors always spit into a cup or spittoon containing a disinfectant solution, such as carbolic acid one part, water twenty parts, or washing soda dissolved in water (as much soda as the water will dissolve). Use plenty of the disinfectant solution.
4. Empty the cup or spittoon once a day at least into the water-closet,

never upon a dust heap. After emptying, wash the vessel well with boiling water and add fresh disinfectant.

5. When out-of-doors spit into pieces of paper or pieces of old linen, and carefully burn the soiled pieces when you return to the house. If handkerchiefs are used, place them when soiled in one of the disinfectant solutions, and after soaking have them boiled for ten minutes before being washed with other clothes.

6. Do not swallow the expectoration, as by so doing other organs of the body may become diseased.

7. Kissing on the lips should be avoided, as germs may be conveyed thus from one person to another.

8. All dishes used by the patient in eating should be boiled five minutes. It is better for the patient to have his own dishes.

9. Bed-linen, towels, etc., used by the patient should be boiled by themselves.

10. Very intimate association with a patient who has lung disease should be avoided. On no account should another person share the same bed; if possible, the patient should have a bedroom to himself.

11. Rooms should be kept clean and well aired. Allow as much sunlight in them as possible; the germs cannot live long in bright sunshine. When sweeping or dusting always use a damp broom or cloth and avoid as much as possible creating a dust. Dust-cloths should be boiled.

12. Rooms which have been occupied by those who have a chronic cough should be well cleaned and painted or whitewashed before being occupied by other people. The walls and floors should be well scrubbed with strong solutions of soda (one pound of washing soda to six gallons of water) or lye and the ceilings whitewashed. The walls then may be repapered or painted.

CARE OF PERSONAL HEALTH.

1. Live in the fresh air constantly; do not be afraid of cold or damp weather. Be outside all the sunny hours of the day.

2. Avoid overheated and ill-ventilated rooms. Keep the windows of your bedroom open all night. If you avoid a draught of air, you need not fear the cold.

3. Do not overclothe yourself; wear woollen garments next the skin, but do not wear more clothes than healthy people wear.

4. A cold sponge-bath every morning will make you less liable to take cold.

5. Drink much milk and eat as much as possible, even if you do not care to. Milk should be boiled before use.

